

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application:

Caldwell et al.

Serial No.: 10/052,297

Filed: January 18, 2002

For: HAND ACCESS PORT DEVICE

Docket No.: AUS-2136-AL

Examiner: Robert, Eduardo C.

Art Unit: 3732

Mail Stop Amendment - Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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APR 19 2004
TECHNOLOGY CENTER R3700

AMENDMENT

Dear Sir:

This Amendment is filed in response to an Office Action mailed February 12, 2004. A shortened statutory period for response has been set to end April 12, 2004.

History of Prosecution

This application was filed with a total of 63 claims. In response to a Restriction Requirement, Applicant elected claims 1-13 for further prosecution and claims 14-63 were cancelled from consideration. In the instant Office Action, claims 1-9 are allowed and claims 10-13 are objected to. In particular, claim 10 and its dependent claims 11-13 are objected to for being multiply dependent on claim 9, which is also a multiple dependent claim. It is respectfully requested that the following changes be made to the application.

04/14/2004 WABRHAM1 00000075 012215 10052297

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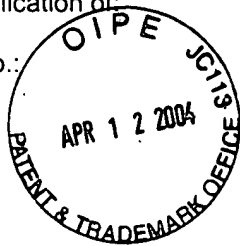
AMENDMENT TRANSMITTAL LETTER

In re application of: Caldwell, et al.
 Serial No.: 10/052,297
 Filed: January 18, 2002
 For: Hand Access Port Device

Attorney Docket No.: AUS-2136-AL

Examiner: Robert, Eduardo C.

Group Art Unit: 3732



Mail Stop Fee Amendment
 Commissioner for Patents
 PO Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [x] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
 [] A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The filing fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	13	MINUS	62	0
INDEP.	2	MINUS	6	0
[] First Presentation of Multiple Dep. Claim				

SMALL ENTITY		or	OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE		RATE	ADDIT. FEE
x 9	0		x 18	-0-
x 43	0		x 84	-0-
+140	-	or	+280	-0-
Total Addit. Fee			Total Addit. Fee	
\$0			\$0	

- ☐ Please charge my Deposit Account No. _ the amount of \$ _____. A duplicate copy of this sheet is attached.
- ☐ Check No. _____ in the amount of \$ _____ is attached for payment of filing and extension fees for this amendment and Notice of Appeal filing fee.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 01-2215.
 A duplicate copy of this sheet is enclosed.
 [X] Any additional filing fees required under 37 C.F.R. 1.16.
 [X] Any patent application processing fees under 37 C.F.R. 1.17.

Respectfully submitted,

Kenneth K. Vu
 Kenneth K. Vu
 Attorney for Applicant

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